TN. ASSOC. of CRIMINAL Defense Lawyers

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5. TOTAL AGGREGATE LOBBYIST COMPENSATION. The term "compensation" is defined by T.C.A. § 3-6-301(7) as ". . . any salary, fee, payment, reimbursement or other valuable consideration, or any combination thereof, whether received or to be received; however, 'compensation' does not include the salary or reimbursement of an individual whose lobbying is incidental to that person's regular employment."

State the aggregate total amount of lobbyist compensation paid by the employer. For purposes of the disclosure, compensation paid to any lobbyist who performs duties for the employer in addition to lobbying and related activities shall be apportioned to reflect the lobbyist's time allocated for lobbying and related activities in this state (see more detailed definitions of "Lobbying," "Administrative Action" and "Legislative Action," and exceptions thereto, in T.C.A. § 3-6-301). Authority: T.C.A. § 3-6-303(a)(1)(A)-(K). (Check the appropriate box.)

T.C.A. § 3-6-301). Authority: T.C.A. § 3-6-3	03(a)(1)(A)-(K). (Check the appropriate box.)		
☐ Less than \$10,000	☐ At least \$10,000 but less than \$25,000		
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000		
☐ At least \$100,000 but less than \$150,000	☐ At least \$150,000 but less than \$200,000		
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000		
☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000		
☐ If the aggregate total amount is \$400,000 or mothousand dollars (\$50,000):	re, you must round the aggregate total to the nearest fifty		
6. LOBBYIST NAMES. List the nam Tennessee. Indicate whether they are em box. Attach additional pages as needed. A	es of the individual lobbyists who rendered serployed within your organization by checking the uthority: T.C.A. § 3-6-303(a)(1).	vices in the "In-House	State of Lobbyist"
LOBBYIST NAME	IN-HOUSE LO	BBYIST	
	<u>and the second of the second </u>		
	The state of the s		
7. LOBBYING-RELATED EXPENDITURE	S		•
NOTE: For the purposes of this Report, effect shall be apportioned equally among	any expenditure made for the purpose of act	nieving a m	ıulti-state
the employer to third party vendors, for the popinion or grassroots action in the State of relating to printing, publishing, advertising, broadigital video discs, infomercials, rallies, democosts, internet services, public relations services grants to issue groups or grassroots organization.	reported under 5), state the aggregate total of expourpose of influencing legislative or administrative Tennessee. These expenditures include, but are adcasting, paid announcements, audiotapes, video onstrations, seminars, lectures, conferences, postaces, governmental relations services, polling servications or any other expense incurred lobbying. Au	action through not limited tapes, compige, telephorices, travel e	ugh public I to, costs pact discs, ne related expenses,
303(a)(2)(A)-(K). (Check the appropriate bo	x.)	Lu 2	? <u>n</u>
X Less than \$10,000	☐ At least \$10,000 but less than \$25,000	THIC	
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000	Y24 A	
☐ At least \$100,000 but less than \$150,000	☐ At least \$150,000 but less than \$200,000		e Mi
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000		
☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000	COSTER COSTER	e C
☐ If the aggregate total amount is \$400,000 or mo thousand dollars (\$50,000):	re, you must round the aggregate total to the nearest fifty	92	

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8. AGGREGATE TOTAL OF ALL IN-STATE EVENTS	
State the aggregate total amount of all employer expenditures for all in-State event(s) reported to the Commission pursuant to T.C.A. § 3-6-305(b)(8). Authority: T.C.A. § 3-6-305(b)(8).	which was or should have been -6-303(a)(3).
9. TO BE SIGNED BY REPORTING OFFICIAL (must be attested to by a wi	itness)
I certify that the information contained in this Report is true and that it is a combest of my knowledge, information and belief.	plete and accurate report to the
Balvara n. Stront	3-30-07
Signature of Person Completing Report Print Name of Person: BARDARA N. Short	Date
I, the undersigned, acknowledge that I have reviewed the foregoing Report a accurate to the best of my knowledge, information and belief.	and certify that is complete and
Banbaro D. Strot	
Signature of CEO, CFO or Authorized Representative Print Name of Person: Representative Short	Date
I,, the undersigned, do hereby witness the above some (Printed Name of Witness) CFO or Authorized Representative, which was	signature of the CEO, s signed in my presence.
Signature of Witness	Date

